PTO/SB/02A (11-00)

Approved for use through 10/31/2002. ONB 0851-0002
Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid URB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _l_ of _l_

Name of Additional Joint Inventor, if any:						this unsigned inventor	
Given Name (first and middle [if any])					Famil	y Name or	Sumame
Stephen M !				MU	LLINS		
Inventor's Signature						.,	Date
Residence: City	Lakewood	State CO			Country U.S.A.		Citizenship U.S.A.
Mailing Address	730 S. Taft Street						
Mailing Address							
City	Lakewood	Stat	e Colo	rado	ZIP 80228	Coun	try U.S.A.
Name of Addition	al Joint Inventor, if an	y:			A petition has bee	n filed for	this unsigned inventor
Given Na	me (first and middle [if any	1)			Famil	y Name o	Sumame
John D.	John D. BIELEFELD						
Inventor's Signature	Loth Byl						Date 1-28-02
Residence: City	Prairie Village	State	KS_		Country U.S.A.		Citizenship U.S.A.
Mailing Address	4820 W. 75th Street						
Mailing Address	15901 E. 20th St. Independence MO 64050 (816) 461-3770						
City	Prairie Village	State Kansas		ZIP 66208	Co	Country U.S.A.	
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature							Date
Residence: City		State			Country		Citizenship
Malling Address							
Mailing Address							
City		State			ZIP		Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the weets of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark. Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS 10 THIS ADDRESS. SEND 10: Assistant Commissioner for Patents, Washington, DC 20231.

w Rosinling

Piease type a	plus sign	(+) inside this	box	1 +

20

PTO/SB/02A (11-00)

Accreed for use through 0.01 (2007). Also determine the present of the present of

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Stephen M MU				ULLINS			
Inventor's Signature	Migh	Mul	<u>Z</u>			1/25/02 Date	
Residence, City	Lakewood	State CO		Country U.S.A.		Citizenship U.S.A.	
Mailing Address	730 S. Taft Street						
Mailing Address				······································			
City	Lakewood	State Colora	do	ZIP 80228	Count	try U.S.A.	
Name of Addition	al Joint Inventor, if an	y:		A petition has been file	for t	his unsigned inventor	
Given Na	me (first and middle [if any)	Family Name or Surname				
John D.			В	IELEFELD			
Inventor's Signature		-				Date	
Residence: City	Prairie Village	State KS		Country U.S.A.		Citizenship U.S.A.	
Mailing Address	4820 W. 75th Street						
Mailing Address				·			
City	Prairie Village	State Kansa	S	ZIP 66208	Çat	untry U.S.A.	
Name of Additional Joint Inventor, if any: A pellition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
Mailing Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 1 minutes to complain. The self usy depending upon the needs of the indicated case. Joint of the provided the form of the provided test and the

Please type a plus sign (+) inside this

Please type a plus sign (+) inside this

U.S. Patent and Table., for use through 10/31/2002 AMB 6951-0002
U.S. Patent and Table. To character of the property of t

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numb or Bar Code Lab			24994		OR 🔲 (rrespondence address below	
Name	Name Gambro, Inc.						
Address	10810 W. Collins Ave.						
Address					,		
City	Lakewood State CO ZIP 80215-4439						ZIP 80215-4439
Country	USA Telephone 303-205			ne 303-205-	2560		Fax 303-231-4198
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF	SOLE OR FIRST INV	ENTOR:			A petitio	n has been fil	led for this unsigned inventor
Given Name (first and mid	idle [if any]) Douglas A.				Family N or Surna		NN
Inventor's Signature	Inventor's 1 C O O D J						
1 9				State MN	Country U.S.A.		Citizenship U.S.A.
Mailing Addre	ess Route 2, Box 324-L	Forma	rlyre	sid ne	at)7	
Mailing Addre							esiding at "
City Battle La		State Minn			ZIP 56515		Country U.S.A.
NAME OF	SECOND INVENTOR	:			A petitio	on has been fil	iled for this unsigned inventor
Given Name (first and middle [if any]) Johnny W. Family Name or Surname HANNAH					:		
Inventor's Signature Date							
Residence: City Timberville State V.			State VA		Country U.S.A.	Citizenship U.S.A.	
Mailing Address Route 2, Box 148							
Mailing Address							
City Timberv	ity Timberville State Virginia				ZIP 2285	Country U.S.A.	
Additional inventors are being named on supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							